

# *Team Wellness Center*

## Member Orientation & Handbook



### **MISSION**

Team Wellness Center is dedicated to enhancing the well-being of individuals by providing an array of comprehensive behavioral and physical health services in an environment that promotes quality of life, continuous improvement, and social awareness.



### **VISION**

It is our goal to be the premier providers of integrated primary care and mental health services. We will accomplish this goal by maintaining high service scores while continually pursuing new and innovative business technology that will further benefit our members in support of their recovery and long-term success.



Welcome to Team Wellness Center. As you approach this important step in your life, we appreciate that you've chosen us to assist you along this journey of recovery. Our staff are committed to your success and as we partner with you, we promise to be good listeners; be culturally sensitive; to assess and make recommendations based upon the latest best-practices in healthcare; to capitalize on your strengths; and we promise to help you in a non-judgmental manner that will preserve your dignity and respect. Team's welcoming approach to care is further emphasized by referring to you as our MEMBER, as opposed to our client or consumer, because we will be better when you are better.

### Health Home Approach

Team Wellness Center provides healthcare, including primary care, behavioral health, and substance use recovery services. We focus on the *whole person*, and assist our members in designing an individualized care plan that addresses physical, emotional, social, and spiritual healthcare needs. Participation in the **Health Home** allows members to have all of their healthcare needs provided and/or coordinated at one facility. Research shows that this is the safest and most effective way to engage in recovery.



**Team Wellness Center General Customer Service available 24 hrs day/7 days-week  
Number: 888-813-TEAM (8326) \*www.t-mhs.com**

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### Member Rights and Responsibilities

Please also see Recipient's Bill of Rights



**Recipients of Mental Health Services have the following rights:**

#### Consent

- You must give your consent to Team Wellness Center to be a part of our Health Home or have any private information about you shared with others.
- In order to give consent you should be informed, and able to understand, the risks, benefits, and other options for treatment or medication. You should not be forced or pressured into a decision.

- This consent may be in writing and signed by you or your legal representative. It can also be your verbal agreement that is witnessed and put in writing by someone who is not treating you at the time.

### **Dignity and Respect**

- The law requires all mental health service providers to treat you with dignity and respect. Your family members also have this right and must be given the opportunity to provide information about you to those treating you. Family members must be allowed information about mental disorders, medications, support services, advocacy groups, financial assistance and coping strategies upon authorization.

### **Freedom from Abuse and Neglect**

- You have the right to NOT be physically, sexually, or otherwise abused.
- You have the right to NOT be neglected.

### **Fingerprints, Photographs, Audiotape, Videotape, and Use of One-Way Glass**

- You have the right to not be fingerprinted, photographed, audio taped, videotaped, or viewed through a one-way glass unless you or your legal representative agree in writing.

### **Confidentiality**

- You have the right to have information about your mental health treatment kept private. Information about you and your treatment cannot be given to anyone except as required by law.

### **Access to Your Record**

- You have the right to see your record. Upon request, you or your legal representative may read or get a copy of all or part of your record.
- We offer online access to your records through [www.mycehr.com](http://www.mycehr.com), ask your Care Coordinator how to gain access.
- You have the right know how much your services cost even if they are billed to Medicaid, a PIHP, or commercial insurance. Any refunds will be paid to the payer. This information is available annually or upon request.

### **Environmental Rights**

- You have the right to treatment in a place which is clean and safe.

### **Civil Rights**

- You have the right to not be discriminated against because of your age, color, height, national origin, physical or mental disability, sex, religion, race, or weight.

### **Treatment**

- You have the right to have, and help create, a written plan of service that is based on your desires, dreams, health care needs and personal goals.
- You have the right to have your plan of service explained in a way that you can understand it. This may mean that additional help will be brought in.
- You have the right to ask for changes to your plan of service at any time, any reason.
- You have the right to be told how much you will be charged for treatment based on your ability to pay.
- You have the right to be treated with dignity and respect in a safe, clean place.

- You may stop treatment with a provider at any time unless the treatment is court ordered. If treatment is court ordered, you could face legal action.
- You have a right to ask that your family or natural supports be a part of your treatment.
- You have the right to receive help in locating community resources that will help meet your everyday needs of life.
- You have the right to have the grievance and appeal procedures explained to you in a way that you can understand it.

**Recipients of Health Home Services have the following responsibilities:**

- ❖ To give information during the Admissions, Assessment, and Person-Centered Planning Process.
- ❖ To ask questions about any areas of treatment you receive through Team Wellness Center.
- ❖ To pay the cost of services, which you agree to before your services start (see sliding fee scale).
- ❖ To follow specific program rules, that will guarantee safe and effective service delivery.
- ❖ To behave in a respectful manner towards your treatment team members and peers.
- ❖ To attend all scheduled appointments or call at least 24 hours in advance to reschedule an appointment you cannot attend.

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## **Grievance and Appeal Procedures**

A member has the right to make a complaint about any area of their care that they are unhappy with. A member will be given the chance to make complaints verbally or in writing. Any complaint made by a member will be kept on record using Team Wellness Center’s Local Grievance & Complaint Form. This form may be completed by a member or by a staff person on behalf of a member. The following action will be taken:

- If a grievance (complaint) is talked about and a decision is made, a report of the decision is written on the Local Grievance & Complaint form. A copy of this form is then sent to the Team Wellness Center Grievance Coordinator.
- If a grievance (complaint) needs further attention to reach a decision, a copy is given to the Grievance Coordinator and to the Executive Director. The Grievance Coordinator will send a letter to the member stating that the matter will be reviewed and a decision will be made in a timely manner. When a decision is made about the grievance (complaint), the Grievance Coordinator will send another letter to the member informing them of the decision. If the matter cannot be fixed within 30 days, the member will receive a letter from the Grievance Coordinator explaining why. The letter will also tell the member when a decision will be made.

- If the member does not agree with the decision, they can appeal through the following agencies: MCPN Grievance Department, the Detroit-Wayne Mental Health Authority Grievance Department, the State of Michigan, the Medicaid Fair Hearings process (if they are a Medicaid recipient), or through the Local Dispute Resolution process.
- The member also has the right to file a complaint through the office of Recipient Rights if they feel their rights have been violated.
- All grievances and their resolutions are reported to the member's MCPN and a resolution is approved by the Detroit Integrated Health Network.
- To contact the grievance coordinator please call (888) 813-8326.

**\*The member may ask for help in using any of the options listed above.**

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### **Member Input**

You are the most important person on your treatment team. Your thoughts are important. You will have many chances to take part in your treatment and be a leader in your recovery. You will be asked to share information during the assessment process and take part in the Person-Centered Planning Process. A plan will be written that is unique to your needs, dreams, and goals. You will be asked to share your satisfaction with treatment services during each meeting with your Care coordinator or Therapist. This information will be written on a progress note. Lastly, you will be given many chances to complete Satisfaction Surveys. Team Wellness Center gives out a survey once a year. You will also be given Satisfaction Surveys from MCPN and Wayne County Community Mental Health. *Note: Our culturally sensitive environment will include cultural activities, and opportunity for you to plan your services in accordance with your own cultural preferences.*

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### **Confidentiality**

It is the policy of Team Wellness Center (TEAM WELLNESS CENTER) that all information contained in your service record and any information acquired in the course of providing mental health services to you shall be protected and remains confidential in accordance with federal and state laws and regulations.

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### **Services and Activities**

Team Wellness Center provides many services for the individual who may be physically, mentally, cognitively, or developmentally impaired, and/or dealing with substance abuse issues. Services are provided by a Health Home Team of professionals. Services will be offered in clinical settings, community settings, and in individual's homes and will include consumer education, support, referrals and advocacy.

Team Wellness Center **will provide the following:**

- Clinical Therapy (Individual, Family, & Group)  
Treatment activity designed to reduce maladaptive behaviors, maximize behavioral self-control, or restore normalized psychological functioning, reality

orientation, remotivation, and emotional adjustment, thus enabling improved functioning and more appropriate interpersonal and social relationships. Evidence-based practices such as integrated dual disorder treatment for co-occurring disorders (IDDD/COD) and dialectical behavior therapy (DBT) are included in this coverage. Individual/group therapy is performed by a mental health professional within their scope of practice or a limited licensed master's social worker supervised by a full licensed master's social worker.

- **ACT**  
Assertive Community Treatment (ACT) is a therapeutic set of intensive clinical, medical and psychosocial services provided by a mobile multi-disciplinary treatment team that includes case/care management, psychiatric services, counseling/psychotherapy, housing support, Substance Use Disorders treatment, and employment and rehabilitative services provided in the beneficiary's home or community. ACT provides basic services and supports essential to maintaining the beneficiary's ability to function in community settings, including assistance with accessing basic needs through available community resources (such as food, housing, medical care and supports) to allow beneficiaries to function in social, educational, and vocational settings
- **Treatment Planning**  
Activities associated with the development and periodic review of the plan of service, including all aspects of the person-centered planning process, such as pre-meeting activities, and external facilitation of person-centered planning. This includes writing goals, objectives, and outcomes; designing strategies to achieve outcomes (identifying amount, scope, and duration) and ways to measure achievement relative to the outcome methodologies; attending person-centered planning meetings per invitation; and documentation. Monitoring of the individual plan of service, including specific services when not performed by the case manager or supports coordinator, is included in this coverage. For children and youth, a family-driven, youth-guided planning process should be utilized.
- **Case management**  
Targeted case management is a covered service that assists beneficiaries to design and implement strategies for obtaining services and supports that are goal-oriented and individualized. Services include assessment, planning, linkage, advocacy, coordination and monitoring to assist beneficiaries in gaining access to needed health and dental services, financial assistance, housing, employment, education, social services, and other services and natural supports developed through the person-centered planning process. For children and youth, a family driven, youth guided planning process should be utilized. Targeted case management is provided in a responsive, coordinated, effective and efficient manner focusing on process and outcomes.
- **Peer Support**  
Peer specialist services provide individuals with opportunities to support, mentor and assist beneficiaries to achieve community inclusion, participation, independence, recovery, resiliency and/or productivity. Peers are individuals who have a unique background and skill level from their experience in utilizing services and supports to achieve their personal goals of community membership,

independence and productivity. Peers have a special ability to gain trust and respect of other beneficiaries based on shared experience and perspectives with disabilities, and with planning and negotiating human services systems.

- **Residential Treatment (jail diversion)**  
Community Living Supports are used to increase or maintain personal self-sufficiency, facilitating an individual's achievement of his goals of community inclusion and participation, independence or productivity. These include, but are not limited to, independent/semi housing preparation, employment preparation and assistance, money management and addressing other social determinants of health. The supports may be provided in the participant's residence or in community settings (including, but not limited to, libraries, city pools, camps, etc.)
- **Psychiatric Care**  
Medication Review is evaluating and monitoring medications, their effects, and the need for continuing or changing the medication regimen. A physician, physician assistant, nurse practitioner, clinical nurse specialist, registered nurse, licensed pharmacist, or a licensed practical nurse assisting the physician may perform medication reviews. Medication review includes the administration of screening tools for the presence of extra pyramidal symptoms and tardive dyskinesia secondary to untoward effects of neuroactive medications.
- **Primary Care**  
Primary Care Team gives the member access to an interdisciplinary care team that addresses the beneficiary's behavioral and physical health needs. The on-site primary care team consists of a physician, physician assistant or nurse practitioner and dentists. X-ray, podiatry, and optometry are also available.
- **Nursing Services**  
Medication Administration is the process of giving a physician-prescribed oral medication, injection, intravenous (IV) or topical medication treatment to a beneficiary. This should not be used as a separate coverage when other health services are utilized, such as Private Duty Nursing or Health Services, which already include these activities. A physician, physician assistant, nurse practitioner, clinical nurse specialist, or registered nurse may perform medication administration under the direction of the physician. A licensed practical nurse who is assisting a physician may perform medication administration as long as the physician is on-site.
- **Co-occurring Substance Abuse**  
Treatment is individualized based on a bio-psycho-social assessment, diagnostic impression and beneficiary characteristics, including age, gender, culture, and development. Authorized decisions on length of stay, including continued stay, change in level of care, and discharge, must be based on the American Society of Addiction Medicine (ASAM) Criteria. Beneficiary participation in referral and continuing care planning must occur prior to discharge and should be based on the needs of the beneficiary in order to support sustained recovery.
- **Crisis Stabilization (24 Hours/7 Days)**  
Intensive crisis stabilization services are structured treatment and support

activities provided by a multidisciplinary team and designed to provide a short-term alternative to inpatient psychiatric services. Services may be used to avert a psychiatric admission or to shorten the length of an inpatient stay when clinically indicated.

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## Expectations

It is the expectation of Team Wellness Center, that people who take part in our programs will make a commitment to better the quality of their life. They will do this by working with qualified, compassionate, and equally committed Team Wellness Center staff members.

**Expectations include:**

- Keeping scheduled appointments.
- If a scheduled appointment cannot be kept, calling ahead at least 24 hours to reschedule.
- Attending all mandatory court hearings, probation office appointments, etc...
- Taking part in the Person-Centered Planning process.
- Respect the rights of your peers and treatment team members.

Members may request a copy of the TWC organizational chart, annual report, strategic plan and other documents, at any time, or retrieve them from our website.



## Service Coordination

When an individual begins services at Team Wellness Center, they will be assigned to a primary program depending on their needs. Based on this program, they will be assigned to a Health Home Team including a Care Coordinator, Therapist and other professionals. Either the Care coordinator or Therapist will coordinate their services and act as a member of their treatment team. A list of all TWC providers and partners are available upon requests and on our website.

**Assigned Care coordinator or Therapist and Health Home Team:**

\_\_\_\_\_  
**Telephone Number:** \_\_\_\_\_

\_\_\_\_\_  
**Executive Director:** \_\_\_\_\_

\_\_\_\_\_  
**Crisis number:** \_\_\_\_\_

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## Advance Directives

You may decide now, how your healthcare will be served in the future, in the event that you are ill or injured and cannot make the decision at a later date. All members receiving services from Team Wellness Center will be educated and offered a chance to initiate an Advance Directive during the Intake process. If a person asks for the chance



to complete an Advance Directive, someone on their treatment team will provide them with the information and help them with the process.

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## Quality and Performance Indicators

It is the policy of Team Wellness Center to ensure the highest quality of care to our members. To accomplish this, in part, we foster an environment of continuous improvement. We gather and analyze data related to our service delivery and the continuum of care. In response to this analysis, we will attempt to upgrade, or modify our services. Our current quality and performance indicators include:

- Reduction in member harm to themselves or others
- Reduction in inpatient psychiatric hospitalization
- Improved social determinants of health efforts:
  - Primary healthcare
  - Dental healthcare
  - Life skills
  - Formal education
  - Job skills
  - Permanent housing
- Improved co-morbidities of health:
  - Substance abuse
  - Diabetes
  - Smoking cessation
  - High Blood Pressure
  - Obesity

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## Comprehensive Assessments

It is the policy of Team Wellness Center to make sure all members get efficient and complete clinical services. This starts with the assessment process. The assessment process is completed using information from several sources. All assessments will evaluate health and safety concerns, need for services, need for additional assessments,

and referrals. Completion of the assessments is important in the Person-Centered Planning Process. A Team Wellness Center member may receive the following assessments based on need and in accordance with the Medicaid/Medicare coverage and the State's description of each of the services (for DWIHN members)\*:

- Integrated Bio-Psycho-Social Assessment
- Case Management Assessment
- Health Assessment
- Psychiatric Evaluation
- Occupational Therapy Assessment

*\*Please refer to the State's Mental Health Code and/or the PIPH/CMHSP Encounter Reporting HPSCS and Revenue Codes document*

To contact other Medicaid Health Plans or Medicaid fee-for-service programs in the area, please contact The Detroit Integrated Health Network: (800) 241-4949

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## **Person Centered Planning**

It is the practice of Team Wellness Center to let a person and/or families make treatment choices based on their desires and needs. Team Wellness Center staff and procedures encourage personal choice and freedom. This is offered through the Person Centered Planning process outlined below:

### **Pre-Planning Meeting**

- During the individual's first appointment with Team Wellness Center, a Pre-Planning Meeting form will be completed. This form will identify who the member would like to have present during their planning meeting. It will also list their difficulties, strengths, dreams, desires and natural supports. The member will also be offered an Independent Facilitator.

### **Planning Meeting**

- At an agreed upon time, a Planning Meeting will be held with the member. The member may also choose to have friends, family members or other natural supports attend this meeting. At this time, goals for treatment will be discussed.

### **Person Centered Plan**

- The member's Care Coordinator will complete the Individual Plan of Service (IPOS) based on goals agreed upon at the Planning Meeting. Once the IPOS is completed, all people who attended the Planning Meeting will sign the IPOS.

The Person-Centered Planning process is on-going. This means at any time the member may ask to change their individualized plan or share their progress or satisfaction with services.



## **Residential Treatment**

In addition to the services provided during outpatient service delivery, TWC will provide the following for those participating in any TWC residential treatment:

- A. Recreational services
- B. Spiritual services
- C. On-site personnel support 24-hours, seven days a week
- D. A written daily schedule of activities that contribute to wellness
- E. A homelike and comfortable setting
- F. Access to nutritious meals and snacks (with dietitian consultation)
- G. Personal privacy
- H. Opportunities to participate in activities that would be found in a home
- I. Individual possessions and decorations with security of personal belongings
- J. Regular meetings between members and program staff
- K. Space for quiet activities, family visits and guests
- L. Input into where member lives and with whom member lives (if applicable)



## **Discharge & Transition Criteria**

It is the goal of Team Wellness Center to help all members increase their ability to take care of themselves and live independently. We begin to help members get ready for discharge or transition as soon as they join our program. We try to avoid having a member leave the program before they have achieved their goals. Members may be discharged from a program or transitioned to another program based upon any of the following:

- Member requests to be discharged and is his or her own guardian.
- Member stops taking part in services and we are unable to contact them.
- Member successfully completes treatment.
- Member has behavioral challenges that make treatment in their current level of care unsafe or ineffective.

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## **Hours of Operation by Location**

TEAM WELLNESS CENTER tries to offer business hours convenient to the people they service. Hours may be different based on location. Members are able to have an appointment after normal business hours, if needed.

**Southgate Location:** (888) 813-8326 (Adults: Outpatient Case Management, Therapy, Psychiatric, Nursing, Primary Care & Pathways Services)  
Monday/Tuesday/Thursday/Friday 8:00a.m. Until 5:00p.m.  
Wednesday 8:00 a.m. – 7:00 p.m.  
Saturday & Sunday services based on availability of the Psychiatrist, usually the clinic is open 7 days per week.  
(Some weeknight and weekend activities will be announced)

**Eastern Market Location:** (888) 813-8326 (Adults: Outpatient Case Management, Therapy, Psychiatric, Substance Abuse, ACT, Housing, and Employment)  
Monday-Friday 8:00a.m - 8:00p.m.  
(Weekend appointments are also available)

**Team East Location:** (888) 813-8326 (Adults & Children: Outpatient Case Management, Therapy, Psychiatric, Primary Care, Substance Abuse, Housing, Employment, Psychiatric Urgent Care, and Dental)  
Sunday-Saturday 24 Hours – 7 Days/week  
(Weekend appointments are also available)

**Team Jefferson Location:** (888) 813-8326 (Adults: Jail Diversion, Transitional-Residential, Outpatient Case Management, Therapy, Psychiatric, Primary Care, Substance Abuse, Housing, Employment, Psychiatric Urgent Care, and Dental)  
Sunday-Saturday 24 Hours – 7 Days/week

**\*TTY/TDD access available at all sites.**

TTY: (734) 324-3165

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### **Response to Identification of potential risk to the person served**

It is the responsibility of Team Wellness Center to respond to any identification of potential risk which may include harm to themselves or others but is not limited to the following:

- Presenting as a danger to yourself or others
- Identifying intent to harm someone (TEAM WELLNESS CENTER has a duty to warn the named person) and/or law officials
- A reported harm or abuse suspected or completed
- Identifying an at-risk behavior: If a member is displaying an at-risk behavior the clinical team will be notified.

## Access to After Hour Services

Once admitted to Team Wellness Center, members are given a phone number which may be used any time of the day, 7 days a week. This phone number will let the member speak with a Clinical Therapist if they are in a crisis and need help.

Crisis Number: \_\_\_\_\_

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### Code of Ethics

It is the policy of TEAM WELLNESS CENTER to make sure all employees follow the ethical standards of the agency. Please read some of the ethical standards below:

- Openness of the company's programs for review by qualified outside parties at all times.
- Pressure-free marketing and management of the company's services. This may happen through consistent and equal communications with all qualified parties. Qualified parties include the individual receiving treatment, related family members, and the payer of services.
- Integrity and honesty in making commitments for care and/or clinical outcomes. Also, estimates of time and costs required to achieve these outcomes.
- A consistently applied, professional standard of individualized care.
- Independent professional relationships with members, families, payers, vendors, and other providers.

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### Follow-Up

Team Wellness Center believes it is important to encourage a member to take part in their treatment. If a member is not taking part in services, the following steps will be taken:

- Try to reach member by phone.
- Ask if the member would feel more comfortable working with a different staff person.
- If staff is unable to make phone contact, a Missed Appointment Letter will be mailed, asking the member to contact Team Wellness Center.
- If staff is unable to make phone contact, a member of the re-engagement team may do a home visit asking the member to contact Team Wellness Center.
- If verbal and written attempts at contact are not successful, the Discharge process will begin.



## Financial Obligations and Fees

As a member of Team Wellness Center, you will be responsible for all charges listed below.

### Outpatient\*\*

- Co-pays for sessions
- Any costs not covered by your insurance

### Employment & Housing

- Lunch money, if lunch is not brought to the program
- Spending money for field trips (optional)

*\*\*Out of pocket expense is based upon member's ability to pay; the TWC sliding fee scale; member's insurance coverage; and/or the Medicare fee schedule plus 30%. (see federal CMS website)*



## Emergency Information

Upon admission to TEAM WELLNESS CENTER, individuals will be offered a tour of the facility. Individuals will be shown emergency exits and/or shelters, fire extinguishers, first aid kits and evacuation maps during the tour. A Team Wellness Center nurse keeps a first aid kit at each location.

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## Seclusion or Restraint

Team Wellness Center does not use methods of seclusion or restraint. It is our practice to use positive feedback, redirection and de-escalation techniques as a response to challenging behaviors. The use of CPI is used by trained staff, in the event that a member is a large risk to themselves or others.



## Smoking Policy

It is the policy of Team Wellness Center to have smoke free (including electronic cigarettes) buildings and vehicles. Each clinic has smoking areas that are located outside of the building. Also, the Pathways Programs have scheduled smoking times for members.

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## Drug Policy



Individuals admitted to TEAM WELLNESS CENTER should not attend TEAM WELLNESS CENTER programs while under the influence of alcohol or illegal drugs. Individuals also may not carry or give out alcohol or illegal/illicit (prescription and/or over the counter drugs) drugs while actively receiving services. Members who abuse illicit drugs while attending the program, will be asked to attend an intervention.

**The following steps will be taken if a member is found to have illegal/illicit drugs in their possession:**

- The member will be asked to give the alcohol to a program staff. Staff will pour it down the toilet with a witness present. The member's treatment team will be told about the situation. An incident report will also be written.
- The member will be asked to give any illegal/illicit substances in their possession to staff. Staff will lock the substances in a medication box and request that local police pick up any illegal drugs. The member's treatment team will be told about the situation. An incident report will also be written.

**The following steps will be taken if a member is found to be under the influence of alcohol or illegal drugs:**

- Member will be evaluated for health and safety. If it is determined safety is not an issue, the member will be given assistance with any transportation needs. The treatment team will be notified and an incident report will be written.

Team Wellness Center does not stop members from bringing legal drugs or prescription medication onto the property. If a Team Wellness Center Pathways Program member has a need to bring legal drugs/prescription medication with them to the program, the following rules must be followed:

- Legal drugs/prescription medication being brought in to the Pathways Program must be reported to the Program Director
- The Program Director must be told why there was a need to bring the substance to the program. This information will be written in a progress note by the Director.
- The member must agree to keep the legal drugs/prescription medication on them at all times while at the program.
- The member must be able to take the medication on their own.



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## Weapons

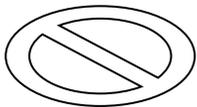
Weapons or ammunition of any type are not allowed on Team Wellness Center property.

- Members, visitors and staff may not carry weapons or ammunition while on Team Wellness Center property.
- Staff will watch for weapons or objects that may be used as weapons (i.e. sharp objects or large, heavy objects). Storage and security of these objects will be reviewed on a case-by-case basis.
- Members found to be carrying weapons or ammunition will be asked to secure them off site.
- Guests are not allowed to carry weapons while visiting or picking up members from Team Wellness Center programs.

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## Program Restrictions

Individuals taking part in Team Wellness Center programs and services may be restricted from doing so for any of the following reasons:



- The member appears to be a risk to themselves, other members, or staff.
- The member's behavior negatively affects the services being received by another member.
- The member repeatedly breaks posted Program Rules.
- The member appears to require a different level of service than their current program provides.

If a member is not allowed to take part in a program or service, the following actions may be taken:

- Member may meet with their Treatment Team to talk about treatment plan review (addendums, add goal(s), reviews change) to their IPOS. A treatment plan review would address the cause of the member being restricted from the program/services. The goal would be to have the restriction lifted, if possible.
- Member may see the doctor for a Medication Review. This could lead to the program/service restrictions being lifted.
- Look at whether the problem behavior is due to an internal cause that Team Wellness Center can address.

Member's taking part in Team Wellness Center programs and services will not be kept from leaving the premises. If a member who is residing in an Adult Foster Care (AFC) placement leaves a program or service before the scheduled end time, the AFC home

staff, treatment team members and emergency personnel will be notified. The individual's treatment team will meet to discuss the situation.

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## **Infractions for Discharge**

Team Wellness Center understands the importance of providing on-going treatment to the individuals we serve. However, an individual may be discharged from Team Wellness Center if they put staff or other recipients at risk by behaving in the following ways:

- Is physically violent or aggressive towards a Team Wellness Center staff member, a recipient of Team Wellness Center services, or any other individual on Team Wellness Center property.
- Threatening to physically hurt a Team Wellness Center staff member or recipient of Team Wellness Center.
- Carrying a weapon, ammunition, alcohol, or illegal drugs onto Team Wellness Center property.

If an individual is discharged for any of the reasons above, the individual's treatment team will make appropriate referrals for the individual to continue treatment elsewhere. The individual's treatment team will also be responsible for evaluating any requests by the individual to return to Team Wellness Center for service

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## **Infection Control Reminder to Our Members**



- Wash your hand with soap and water!
  - Wash after eating, drinking and smoking, applying cosmetics or lip balm and handling contact lenses.
- It is important that you don't visit the clinic if you are feeling ill (flu, cold, ECT.).
- Please make sure the nurse knows if you have an infectious disease
- Report to the staff any exposure to blood.
- If you would like additional information on infection control procedures, please see your nurse or Executive Director.

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## **Self Determination**

Self-determination is a set of principles to enable you to live in and be a part of your community. These principles lead to arrangements where you control the individual budget for your plan, you choose who supports you, when they support you, and how that support is provided

- Everyone who uses public mental health services and supports has the right to choose their provider
- Everyone uses the person-centered planning (PCP) process to decide what supports he/she needs in order to do what you want in his or her life.
- The result of the PCP process is an individual plan of service, sometimes called a “plan”, that lists the service and supports and how much of them are needed.
- Arrangements that support self-determination are also developed through the PCP process.

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### **Requirements for reporting**

Team Wellness Center staff are State mandated reporters for suspected abuse and neglect with adults and children. If the staff suspects abuse or neglect it will be reported immediately to the appropriate parties. TEAM WELLNESS CENTER will also report probation/parole requirements as well as participation in services as mandated by the courts.

Member Name:	Case #:
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**Contents and Signature Page**

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Requirements for reporting	DWIHN Welcoming Video

**A Team Wellness Center staff person has reviewed the above items with me and I have received a copy of the Member Handbook.**

\_\_\_\_\_ In person    \_\_\_\_\_ Via US Mail    \_\_\_\_\_ Via Email    \_\_\_\_\_ Via Member Portal or Website

\_\_\_\_\_  
Member/Guardian Name Printed

\_\_\_\_\_  
Member/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Reviewer's Name Printed

\_\_\_\_\_  
Reviewer's Signature

\_\_\_\_\_  
Date